# 2016:08:15:08:00094711

**FEC** FORM 3X

Only

FE7AN014

# REPORT OF RECEIPTS **AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

				L.	<u>.</u> •	COTTICE LASE AUX	#1,11 1 3 2
1. NAME OF COMMITTEE (in full)	TYPE OR PRI	NT ▼	Example: If ty over the lines		12FE4M5	;	,
SAVE RT 66		1111				<u> </u>	ببب
						1111	
ADDRESS (number and street)	13419	CENT	AL NE	<del></del>			
Check if different than previously reported. (ACC)	ALBU	QUERQ	UE		MM	87.106-	1.431
2. FEC IDENTIFICATION N	UMBER ▼	CITY	′▲	:	STATE A	ZIP COI	DE ▲
C005856	53	3. IS	THIS PORT	NEW (N) OR	AM (A)	ENDED ,	
4. TYPE OF REPORT (Choose One)	(b) Monthi Report	, 05 .	20 (M2)	May 20 (M5)	Aug 2	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 2	20 (M3)	Jun 20 (M6)		20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 2	0 (M4)	Jul 20 (M7)	Oct 2	20 (M10) 1 4 4 4 4	Jan 31 (YE)
Quarterly Report (i July 15 Quarterly Report (i October 15	Q2) (C) 1:	2-Day RE-Election eport for the:	Primary (		General (	· (+	Runoff (12R)
Quarterly Report (  January 31 261  Year-End Report (	5	Election	м м on	. / . D : D . /	<b>y y y y</b>	in the State o	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
July 31 Mid-Year Report (Non-election Year Only) (MY)	on P	0-Day  OST-Election  eport for the:	General (	30G)	Runoff (3	0R)	Special (30S)
Termination Report (TER)		Election	M M	/ D D /	<b>Y Y Y Y</b>	in the State o	f
5. Covering Period O	8 26	201	Š throug	h / Z	. 31	2015	ž.
I certify that I have examined t	his Report and	to the best of i	my knowledge ar	nd belief it is tru	ue, correct and	complete.	<del></del>
Type or Print Name of Treasure	er <u>57</u>	ETHEN H	SCHILL	EDER		<u></u>	
Signature of Treasurer		If Soli	ial	C	Date 08	10	2016
NOTE: Submission of false, error	neous, or incom	plete information	may subject the	person signing t	his Report to th	e penalties of 52	U.S.C. § 30109
Office Use					·	FEC FOR	

# 2016-08-15-03-00094712

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write	or	Type	Committee	Name		
			5	AVE	14	66

Report Covering the Period:

From:

08 26 2015

To: 12 31 2015

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand y y y y January 1, 2015		3 <b>7</b>
	(b) Cash on Hand at Beginning of Reporting Period	, 5,309.00	5 309.00
	(c) Total Receipts (from Line 19)	, 5,269.67	5,269.67
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	·	, , , , , , , , , , , , , , , , , , ,
7.	Total Disbursements (from Line 31)	,	·
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, , 39 33	, , 39.33
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	, ,	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	· · · · · · · · · · · · · · · · · · ·	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

# 20-6-08-15-03-00094713

## **DETAILED SUMMARY PAGE**

of Receipts

Write or Type Committee Name

FEC Form 3X (Rev. 06/2004)

SAVE RT 66

Report Covering the Period:

From:

08 26 2015

To:

12 31 2015

Page 3

	I. Receipts	To	COLUMN A			OLUMN B ar Year-to-Date
11. C	ontributions (other than loans) From:			· · · · · · · · · · · · · · · · · · ·		
(a	a) Individuals/Persons Other					
	Than Political Committees		. 1 . 1	m // m6		11 11 21/ 20
	(i) Itemized (use Schedule A)	3	4,40	04.00	<b>5</b>	4,404.00
	(ii) Unitemized ANDNYMOUS (iii) TOTAL (add	,	-	500		4,404.00 ,905.00
	Lines 11(a)(l) and (ii)	,	5,3	0900	, 7	5, 309 00
(t	o) Political Party Committees	,	,	•	,	, -
(0	c) Other Political Committees					
	(such as PACs)	,	,	•	. 7	• .
(0	d) Total Contributions (add Lines		-			
	11(a)(iii), (b), and (c)) (Carry		<i>~</i> 5	0900		1 700 00
	Totals to Line 33, page 5)	,	ラ, <i>う</i>	07.00	. 3	5,309.00
	ransfers From Affiliated/Other					
۲	arty Committees	3	7	•	,	<b>7</b> .
13. A	II Loans Received	,	.,	• ,	,	,
14. L	oan Repayments Received			•,		
	Offsets To Operating Expenditures	,	7		,	,
(1	Refunds, Rebates, etc.)					•
(6	Carry Totals to Line 37, page 5)	,	,	•	. 1	, .
16. F	Refunds of Contributions Made	,	•			
to	Federal Candidates and Other					
F	Political Committees	,	,	-	,	<b>y</b> .
	Other Federal Receipts				4	
-	Dividends, Interest, etc.)	,	,	•	. ,	,
	ransfers from Non-Federal and Levin Funds					
(-	a) Non-Federal Account	•				
	(from Schedule H3)	,	,		,	,
(	b) Levin Funds (from Schedule H5)	<b>7</b> .	,	• .	,	,
(	c) Total Transfers (add 18(a) and 18(b))	,	7	•	7	,
19. 7	Fotal Receipts (add Lines 11(d),					
	12, 13, 14, 15, 16, 17, and 18(c))▶	,	5,3	09.00	,	5,309.00
an -	Total Enderel Bosoints	•				
	Total Federal Receipts (subtract Line 18(c) from Line 19)▶					_
,	GUDINGE LINE 10(0) NOM LINE 10/ MMM	-	_	•	5	•

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B** II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share ..... (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures ..... (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ......▶ 22. Transfers to Affiliated/Other Party Committees......Contributions to Federal Candidates/Committees and Other Political Committees..... 24. Independent Expenditures 26. Loan Repayments Made..... Loans Made..... Refunds of Contributions To: Individuals/Persons Other Than Political Committees ..... (b) Political Party Committees ..... (c) Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))...........▶ 29. Other Disbursements ...... 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share ..... (ii) "Levin" Share..... (b) Federal Election Activity Paid Entirely With Federal Funds ..... (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....▶ 31. Total Disbursements (add Lines 21(c), 22, 5,269.67 5,269.6 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..



32. Total Federal Disbursements

(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)......

## **DETAILED SUMMARY PAGE**

of Disbursements

	FEC Form 3X (Rev. 02/2003)	0. 0.00			Page 5
III	. Net Contributions/Operating Expenditures		COLUMN A al This Period	1	OLUMN B ar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	,	5,309.00		5,309.00
34.	Total Contribution Refunds		•		
	(from Line 28(d))	. <b>9</b> ,	<b>,</b>		,
35.	Net Contributions (other than loans)				
	(subtract Line 34 from Line 33)	3	,	, ,	, , , , , , , , , , , , , , , , , , ,
36.	Total Federal Operating Expenditures	-		•	• •
	(add Line 21(a)(i) and Line 21(b)) ▶	3	<b>)</b>		•
37.	Offsets to Operating Expenditures			•	
	(from Line 15, page 3)	,	7		.5
38.	Net Operating Expenditures				
	(subtract Line 37 from Line 36)	,	,	, , , , , , , , , , , , , , , , , , ,	,

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CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE / OF 8		
TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)		
immers ilevall to	į	Detailed Summary Page	V11a 11b 11c 12		
			13   14   15   16   17		
Any information copied from such Reports and Str or for commercial purposes, other than using the	name and a	ay not be sold or used by any per address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
SAVERT 66					
Full Name (Last, First, Middle Initial)  L. TIMMY ANACNO.	STAKO	5	Date of Receipt		
Mailing Address			09 21 2015		
City 6411 CENTICA	State	Zip Code	09 21 2015		
ALBUQ.	NM	87105	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		, 201.00		
Name of Employer WESTETZN VIEW DINES	Occupation	WNER	-		
Receipt For: & STEAKHOUSE LLK Primary General	1 .	Year-to-Date ▼	-		
Primary General Other (specify) ▼	33 - 33-				
Outer (specify) \		, ,201.00			
Full Name (Last, First, Middle Initial)	· H		Date of Receipt		
Mailing Address			Date of Receipt		
6910 CENTRAL	5E		100222015		
City	State N/M	Zip Code 87/08			
		0 1100	Amount of Each Receipt this Period		
FEC ID number of contributing tederal political committee.	С		, ,201.00		
Name of Employer	Occupation				
TEWLERS REPAIR SHOP Receipt For:	<del></del>	INER _	4		
Primary General	Aggregate	Year-to-Date ▼			
Other (specify) ▼		, ZO1:00.			
Full Name (Last, First, Middle Initial)  C. MARK & JEAN BERSTEI	(A)		Date of Receipt		
Mailing Address		• · · · · · · · · · · · · · · · · · · ·	7		
3416 CENTRAL	-56	4224 RIOGRANDE NW	10 22 2015		
City ACBUQ.	State V/M	Zip Code - <del>8 7106</del> 87107	Amount of Each Receipt this Period		
FEC ID number of contributing	С				
federal political committee.	_		, ,201.00		
Name of Employer FLYING STAR	Occupation	NER			
Receipt For:		Year-to-Date ▼	-		
Primary General	. is a royale				
Other (specify) ▼		, ,20(.00			
SIMPTOTAL of Passints This Pass (antismal)	······································		, , , 603.00		
SUBTOTAL of Receipts This Page (optional)			, , , , , , , , , , , , , , , , , , , ,		
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CHEDITE A (EEC Form 2V)	_		EOD LINE NUMBER. DACE 7 OF
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 2 OF 8 (check only one)
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	V 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements may name and add	not be sold or used by any pe fress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  SAVERT66			
Full Name (Last, First, Middle Initial)  A		Zip Code 87106	Date of Receipt    Date of Receipt   Date of Rec
FEC ID number of contributing federal political committee.	С	8 111/2	, 20 1,00
Name of Employer  JIM'S 66 MUFFLER  Receipt For: AUTO SETEVICE, INC.  Primary General  Other (specify)	Occupation OWNE Aggregate You	20100	
City CENTURY S	TCAL SE SQUARE State	Zip Code	Date of Receipt  10 12 2015
FEC ID number of contributing federal political committee.  TINNIN INVESTMENTS, IN Name of Employer	NM C K	87108	Amount of Each Receipt this Period
Name of Employer  CLASSIC CENTURY SQUARE  Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	(ear-to-Date ▼ , 2 .0 1; 00	
Full Name (Last, First, Middle Initial)  C. CHRIS CHRIC  Mailing Address  S925 CENTRA  City  ABUA.	AL NW State	Zip Code 8 7105	Date of Receipt  // 0 02 2015
FEC ID number of contributing federal political committee.	NM C	0 1103	Amount of Each Receipt this Period , , Z 0 ( . 00
Name of Employer  SKI HI LIQUORS  Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	UNETZ 'ear-to-Date ▼ , 201,00	
			, ,603.0

# 2016 · 08 · 15 · 0M · 00094718

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE OF R (check only one)
Any information copied from such Reports and Statemen or for commercial purposes, other than using the name	nts may not be sold or used by any p	
NAME OF COMMITTEE (In Full)  SAVERTUBE	,	
Full Name (Last, First, Middle Initial)  ALAN DIRECT  Mailing Address  11109 CENTRAL NE  City  Star  ALBUQ,  FEC ID number of contributing federal political committee.  FLEA MARKET THINKS & COLLECT Name of Employer  INDICAL FLEA MARKET  Receipt For:  Primary  General  Other (specify)   Aggreen	9706 78ES pation  Content egate Year-to-Date ▼	Date of Receipt  10062015  Amount of Each Receipt this Period  , , , 201.00
PETERS ON PROPERTIES	عادر te Zip Code	Date of Receipt  Date o
IE'S FAMILY RESTAUTANT, INC		Date of Receipt  O 9 13 2015  Amount of Each Receipt this Period  , L01.00
SUBTOTAL of Receipts This Page (optional)		, ,603,00

TOTAL This Period (last page this line number only)......

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4 OF 8 (check only one)  11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full)	s may not be sold or used by any pend address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  A. KERRY RAYNER  Mailing Address  3201 CENTRAL NE  City State	Zip Code	Date of Receipt
FEC ID number of contributing federal political committee.  Name of Employer  Occupa	1 87106	Amount of Each Receipt this Period
Passint For:	Zip Code 1 87106	Date of Receipt  9 30 2015  Amount of Each Receipt this Period  , , , , 201.86

Other (specify) ▼	, ,20 1.00	
Full Name (Last, First, Middle Initial)  C. STEVE PATER	NOSTER	Date of Receipt
Mailing Address 3500 CENTRA	H NE	09 02 2015
City ACBUQ.	State Zip Code Nan 87106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	, ,201.00
Name of Employer  O NOTHERN THURN GRULL	Occupation  OWNER	
Receipt For:  Primary ☐ General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (options	4)	, ,603.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule	
indicated the Valified	for each category of the Detailed Summary Pag	
		any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
SAVERT	66	<u> </u>
Full Name (Last, First, Middle Initial)  A.  Mailing Address	LER	Date of Receipt
3503 CENTRAL	NE State Zip Code	09 05 2015
ALBUQ.	NM 87106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	, ,201.00
Name of Employer  TOAD ROAD	Occupation  OWNET	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	00
Full Name (Last, First, Middle Initial)  B. TASON ZA	ING	Date of Receipt
Mailing Address 3523 CENTR	AL NE	09 17 2015
City ACBUR	State 'Zip Code  NM 87106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	, ,201.00
Name of Employer FAN TAN 6/CHOW	Occupation  OWNER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	00
Full Name (Last, First, Middle Initial)  C. CFDIRCE K	ATSATROS	Date of Receipt
Mailing Address 3916 CFW77		09 16 2015
ACBUQ.	NM 87105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	, , , , , , 201. 0
Name of Employer  FE CARLY LIQUOIS & STEAKHO.	Occupation  SE OWNER	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	, ,Zol.	06

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE ( OF 8		
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)		
		Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements mane and a	ay not be sold or used by any peuddress of any political committee	rson for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full)					
SAVETET 66					
Full Name (Last, First, Middle Initial)  A. STEPHEN H SCH	HOEDE	R	Date of Receipt		
Mailing Address 3419 CENTRAL	NE		08 26 2015		
ALBUQ.	State	Zip Code 87106	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		195.00		
Name of Employer	Occupation		495.00		
NOB HILL MWSIC Receipt For:	00	UNER	_		
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 495,00	·		
Curior (spaciny) \( \Psi \)		, , , , , , , , ,			
Full Name (Last, First, Middle Initial)  B. RON PETERSO	XU.		Date of Receipt		
Mailing Address 4418 CEVTRA			12'08'Z015		
ACBUQ.	State	Zip Code <b>87108</b>	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		, , 201.00		
Name of Employer PETETISON FIREARMS, LLC	Occupation	uner			
Receipt For:		Year-to-Date ▼			
Primary General Other (specify) ▼	; .	, 201.00			
Full Name (Last, First, Middle Initial)					
C. ANTHONY ANEL Mailing Address	u sc	= Po BOX 4014Z	Date of Receipt  9 9 03 2015		
City	State	Zip Code	09 03 2015		
AEBVQ.	NM	87196	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	·	, ,201.00		
Name of Employer	Occupatio		_		
HONY ANGUA AT CHITETURE Receipt For:		WNER	_		
Primary General Other (specify)	Aggregate	• Year-to-Date ▼ 			
		, , , , , , , , , , , , , , , , , , , ,	<u> </u>		
SUBTOTAL of Receipts This Page (optional)			, ,897.00		
TOTAL This Period (last page this line number	only)				

SCHEDULE	Α	(FEC	Form	3X)
ITEMIZED	REC	EIPTS	•	

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 8 (check only one)  11a 11b 11c 12  13 14 15 16 17
ny information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  SAUCKT (Go.	name and address of any political committee	
Mailing Address  ABVR.  FEC ID number of contributing federal political committee.  Name of Employer  HABS STORE		Date of Receipt  OB 10 2015  Amount of Each Receipt this Period  , , 201.00
Receipt For:    Primary   General   Other (specify) ▼	Aggregate Year-to-Date ▼ , , Z 0 1 . 0 C	
Full Name (Last, First, Middle Initial)  JOHN MIAIZIS  Malling Address  6217 CONTRAL NO  City  ACTOUR	State Zip Code NM 87105	Date of Receipt  O 9 28 2015  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer  MAC'S LA SIERRA WHITE SH	C Occupation	, , , 201.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ , ,201.00	·
Full Name (Last, First, Middle Initial)  DOWNTON'S TO U  Mailing Address  // 3419 CENTTE  City  ABQ.  FEC ID number of contributing federal political committee.		Date of Receipt  / Z Z/ 2015  Amount of Each Receipt this Period  , 90.00
Name of Employer  SAVERT66. OR C  Receipt For:  Primary General  Other (specify) ▼	Occupation  WEBSITE  Aggregate Year-to-Date ▼  , , , 90.0	
SUBTOTAL of Receipts This Page (optional)		, , 492.00
TOTAL This Period (last page this line number	only)	•

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SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE / OF	4			
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)				
	Detailed Summary Page	21b	22 23 24 25 28c 29	26 30b			
Any information copied from such Reports and Staten	nents may not be sold or use		<u> </u>	بب			
or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)		<del> </del>					
SAVERT66.ORG							
Full Name (Last, First, Middle Initial)							
CIVIC CENTER GARA	GE		Date of Disbursement				
Mailing Address	A		09 11 2015 TO12 29 2015				
1ST CIVIL PLAZA NV	<b>✓</b>		TO12 29 2015				
City ALBUR	State Zip Code  M 87102	2	•				
Purpose of Disbursement							
PARKING			Amount of Each Disbursement this Per				
Candidate Name		Category/ Type	, , 35.0	0			
Office Sought: House Disbursen	nent For:	. ,3he	and the state of t	. • •			
Senate	Primary General	ļ					
President State: District:	Other (specify)						
Full Name (Last, First, Middle Initial)							
3.	م ۱۸۱ س		Date of Disbursement				
DON MICKEY DESIGN	> 1~ -		10 23 ZOL5				
Mailing Address  1530 CIPARD NE	•		10 23 2015				
City	State Zip Code 87106						
Purpose of Disbursement	M 87106						
PRINTING			Amount of Each Disbursement this Per	iod			
Candidate Name		Category/	, Z,953.0	1			
Office Sought:   House   Disburser	nent For	Туре	, 4,17 7.0	<b>/</b>			
Senate Disburser	Primary General						
President	Other (specify) ▼	; <u>-</u> .					
State: District:	····	<u> </u>	•				
Full Name (Last, First, Middle Initial)	5	•	Date of Disbursement				
AIRTORT MAIL	FACILITY		· ·				
Mailing Address 2100 GESRUE R	· · · · · · · · · · · · · · · · · · ·		09 06 2015	•			
City	State Zip Code						
ALBUQ A Purpose of Disbursement	IM 87106						
POSTALE			Amount of Each Disbursement this Per	ind			
Candidate Name		Category/					
Office Sought: House Disburser	mont For	Type	, ,530.3	9			
Office Sought: House Disburser Senate	nent For: Primary General		•				
President	Other (specify) ▼						
State: District:							
SUBTOTAL of Disbursements This Page (optional)			, 3,518.4	10			
TOTAL This Period (last page this line number only)			• • • • • • • • • • • • • • • • • • •				

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ITEMIZED DISBURSEMENTS	for each category of the	216	·	<b></b> 2	3 [	24	25	Г	7 26
	Detailed Summary Page	27	28a	1 <sub>2</sub>	8b	28c	29		30b
Any information copied from such Reports and Statem	nents may not be sold or used	by any per	son for the	purpo	se of	soliciting	contril	butior	s
or for commercial purposes, other than using the nam	e and address of any political	committee	o solicit co	ntributi	ions 1	from suc	h comm	rittee.	
NAME OF COMMITTEE (In Full)									
SAVERT 66. ORG									
Full Name (Last, First, Middle Initial)			T						٠
A.			Date o	f Disb	ursen	nent			
NUSENDA			, M M	, .	o i	) / Y	Y -1	įγ	3
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1801 LOMAS BLVD	NG 75 000		<del> </del>						
City ALBUR,	State Zip Code JM 87106	, <b>&gt;</b>						,	
Purpose of Disbursement	0 110	<del> </del>	1				_		
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Candidate Name		Category/					j /	, ,	درح
	<u> </u>	Туре	1 50, 1			<b></b>	:16	?. ·	$\mathcal{U}$
Office Sought: House Disburser									
Senate	Primary ☐ General Other (specify) ▼								
State: District:	Carol Johoonii								
Full Name (Last, First, Middle Initial)	<del></del>								
B.	116		Date of	f Disb	urser	nent			
GO DADDY, COM	<i></i>	····	- 4	ر ر م	ָם <u>.</u>	5 Z	γ	ن ۳۰۰۳ سسم	
Mailing Address	SUITE 221		0	7	1.	7	-01	<u>?</u>	
Mailing Address 14455 N. HAYDEN  City  Scott SDALE  A	State Zip Code	·	+						
SCOTTSDALE A	7. 85260								
Purpose of Disbursement	_		7 .			<b>.</b>			
WEBSITE SERVICE	>		1			Disburse			
Candidate Name		Category/ Type		_			15	1.7	7
Office Sought:   House   Disburser	ment For:	, the	1	,		· •			₹
Senate	Primary General								
President	Other (specify)	:	[.						
State: District:			<u> </u>						
Full Name (Last, First, Middle Initial)	•.		D-4-	d Diat	<del></del> -	ma=*			
C. STAPLES			Date				. • 3		
Malling Address			<b>-</b>   ",	<b>5</b>	9	<b>o</b> / 2	20	`, ž	5
3339 CENTRAL	NE			,				•	· ·
City	State Zip Code	· · · · · · · · · · · · · · · · · · ·							<b>4</b> 2.
Purpose of Disbursement	IM 87106	<u> </u>	4						-
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Candidate Name		Category/		٠	,			٠.	
		Type			,	ر. <u>.</u>	187	1 . 4	57
· I	ment For:								-
Senate President	Primary General								
State: District:	Other (specify)		1						
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SUBTOTAL of Disbursements This Page (optional)						· .	65	5.	84
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TOTAL This Period (last page this line number only	)			. :	<b>)</b>	,		• .,	

SCHEDULE B (FEC FORM 3X)	Use separate schedule(s)	FOR LINE N	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	216	22 23 24 25 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and States or for commercial purposes, other than using the nar	nerits may not be sold or used ne and address of any political	committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
SAVETET 66. ORG			
Full Name (Last, First, Middle Initial)			
A. AMETRICAN EX	POECS		Date of Disbursement
			12 06 2015
Mailing Address Po Box 6504	148		· · · · · · · · · · · · · · · · · · ·
City DALLAS T	State Zip Code	448	
Pulpose of Dispulsement	1 .		,
OFFICE SUPPLIES/CRE	DIT CARD		Amount of Each Disbursement this Period
Candidate Name		Category/ Type	, ,235.92
Office Sought: House Disburse	ment For:	.,,,,	en e
Senate President	Primary General		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			
R	Della.	}	Date of Disbursement
ARCHAEOPTERYX Mailing Address			09 16 2015
1501 BRYN MA	WR NE		
City ALBUQ. N	State Zip Code		
Purnose of Dispursement	<b>[</b>		
WEB SITE DESIGN,	INFKER		Amount of Each Disbursement this Period
Candidate Name		Category/	, ,600.00
Office Sought: House Disburse	ment For:	Туре	
Senate	Primary General	}	
State: District:	Other (specify) ▼	* *.	• .
Full Name (Last, First, Middle Initial)			
C. / / /	•		Date of Disbursement
Mailing Address			10 19 2015
SIZ YALE BLU	05E		10 1 2015
City	State Zip Code UM 87106		iž.
Purpose of Disbursement	01106		
TRANSCRIPTION	TRANSCRIPTION		
Candidate Name		Category/	11017
Office Sought: House Disburse	ment For:	Туре	, 48.17
Senate	Primary General	1	
President State: District:	Other (specify)	İ	
Signific.			Approximation of the second
SUBTOTAL of Disbursements This Page (optional).			, 884.09
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TOTAL This Period (last page this line number only	′)	·····	and the second of the second o

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SCHEDULE B (FEC Form 3X)		FOR LINE N	IUMBER: PAGE 4 OF 4			
TEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	one)			
	for each category of the Detailed Summary Page	21b	22 23 24 25 26			
	<u></u>	27	28a 28b 28c 29 30b			
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam	nents may not be sold or used	by any person	n for the purpose of soliciting contributions			
	io and address of any political	Committee 10	Solot Whateadria non Soot Williams.			
NAME OF COMMITTEE (In Full)						
SAVERT66. ORG						
Full Name (Last, First, Middle Initial)			Date of Dishumament			
DICK SATTETZ			Date of Disbursement			
Mailing Address	·····		12 22 2015			
9201 MONTGON	UERY NE					
City ABQ N	State Zip Code  M 87111					
Purpose of Disbursement	m 87111		/			
ACLOUNTING FEE		***	Amount of Each Disbursement this Period			
Candidate Name		Category/	• • • • • • • • • • • • • • • • • • • •			
		Type	, 79.32			
Office Sought: House Disburser						
Senate	Primary General					
President State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
3.			Date of Disbursement			
WALMATET	••		M M A D G A TY Y Y			
Mailing Address	هما هما		08 28 2015			
City ACRURA.	State Zin Code					
ALRUD.	NM 87110					
Purpose of Disbursement						
			Amount of Each Disbursement this Period			
Candidate Name		Category/	, ,/3202			
OFFICE SUPPLIES Office Sought:   House   Disburser	nent For:	Туре				
Senate Dispurser	Primary General	1				
President	Other (specify) ▼					
State: District:		-	•			
Full Name (Last, First, Middle Initial)						
Full Name (Cast, First, Wildlie Initial)	<del>-</del> ,					
C.			Date of Disbursement			
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Mailing Address						
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Mailing Address  City  Purpose of Disbursement	State Zip Code	Category/ Type	Amount of Each Disbursement this Period			
Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought: House Disburse	State Zip Code	Category/	Amount of Each Disbursement this Period			
Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought: House Disburse Senate	ment For: Primary General	Category/	Amount of Each Disbursement this Period			
Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought: House Disburser  Senate President	ment For:	Category/	Amount of Each Disbursement this Period			
Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought: House Disburse Senate	ment For: Primary General	Category/	Amount of Each Disbursement this Period			
Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought: House Disburser Senate President  State: District:	ment For: Primary ☐ General Other (specify) ▼	Category/ Type	Amount of Each Disbursement this Period			
Mailing Address  City  Purpose of Disbursement  Candidate Name  Office Sought: House Disburser  Senate President	ment For: Primary ☐ General Other (specify) ▼	Category/ Type	Amount of Each Disbursement this Period			

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED INDEPENDENT EXPENDITURE	S		PAGE OF FORM 3X
AME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
SAVERT 66			C00585653
heck if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on TE AMENDED TECTURET
Full Name of Payee		7	Date of Public Distribution/Dissemination
CIVIC CENTER G	ARAGE		0 9 °11 2015
Mailing Address	···· • · · · · · · · · · · · · · · · ·		
1 ST CIVIC PLA	ZA NW		Amount
City	State	Zip Code	, , 35.00
ALBUQ.	NM	87102	Date of Disbursement or Obligation
Purpose of Expenditure PARKING		Category/ Type O /	M M / D D / Y Y Y
Name of Federal Candidate		Support	Office Sought: House District:
		Oppose	President Senate State:
Calendar Year-To-Date			Disbursement For: Primary General
Per Election for Office Sought	, ,	•	Other (specify) >
Full Name of Payee			Date of Public Distribution/Dissemination
DON MICKEY T	ESILUS	INC.	10 23 2015
Mailing Address			10 67 6017
1530 GIRARD	NE		Amount
City	State	Zip Code	2.953.01
ALBUQ.	NM	87106	Date of Disbursement or Obligation
Purpose of Expenditure		Category/	M M / D D / Y Y Y
PRINTING		Type 0 /	/
Name of Federal Candidate		Support	Office Sought: House District:
1		Oppose	President Senate State:
Calendar Year-To-Date	*.		Disbursement For: Primary General
Per Election for Office Sought	, ,		Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expendit	iures		, 2,988.01
(b) SUBTOTAL of Uniternized Independent Exper	nditures	100000000000000000000000000000000000000	7
(c) TOTAL Independent Expenditures			. 2,988.01
with, or at the request or suggestion of, any canc party committee) any political party committee or	lidate or authorize its agent.		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
SHSMinon	6		## M / D D / Y Y Y Y
Signature		Date	01 29 2016

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED INDEPENDENT EXPENDITURES	PAGE Z OF 6 FOR UNE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
SAVERT66	C00585653
DAVER 166	000000000
Check if 24-hour report 48-hour report New report Amends report filed COPY TO COMPLETE	d on AMENDED REPORT
Full Name of Payee	Date of Public Distribution/Dissemination
AIRPORT MAIL FACILITY	09 06 2015
Mailing Address  2100 GEORGE RD SE	Amount
City State Zip Code	530.39
ALBUQ. NM 87106	
Purpose of Expenditure  POSTACE  Category/ Type  0//	Date of Disbursement or Obligation  M M / D D / Y Y Y
Name of Enderel Candidate	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disb	oursement For: Primary General
Per Election for Office Sought	Other (specify) >
Full Name of Payee	Date of Public Distribution/Dissemination
NUSENDA	12 31 2015
Mailing Address	Amount
1801 LOWAS BLVD NE	
City State Zip Code  AZBUQ. NM 87106	, , 16.50
Purpose of Expenditure Cottogon/	Date of Disbursement or Obligation
Category/ Type O / /	M M / O D / Ý Ý Ý
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
	bursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	, ,546.89
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>9</b>
(c) TOTAL Independent Expenditures	, ,546.89
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
SH Schurch Date &	A MILITO D'I Y Y Y Y
Signature Date C	29 2016

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
SAVE RT 66	C 00 58 565 3.
heck if 24-hour report 48-hour report New report Amends report filed	TON REPORT
Full Name of Payee	Date of Public Distribution/Dissemination
GO DADDY. COM LLC	09 15 2015
Mailing Address	
14455 N. HAYDEN SUITE 226	Amount
City State Zip Code	15177
SCOTTSDALE AZ 85266	Date of Disbursement or Obligation
Purpose of Expenditure  WEB SITE SETZVICES  Category/ Type OI 1	M M
Name of Endowl Condidate	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Dist	oursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
STAPLES	10 20 2015
Mailing Address 3339 CENTRAL NE	Amount
City State Zip Code	48 7.57
ALBUQ. NU 87106	Date of Disbursement or Obligation
Purpose of Expenditure  OFFICE SUPPLIES  Category/ Type 011	M M / D D / Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Dist	bursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	, .639 34
(b) SUBTOTAL of Uniternized Independent Expenditures	
(c) TOTAL Independent Expenditures	, ,639.34
Under penalty of perjury I certify that the independent expenditures reported herein were not rewith, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
SH Church Date	01 29 2016

PAGE 3 OF 6

# SCHEDULE E (FEC Form 3X) П

EMIZED INDEPENDENT EXPENDITURES	PAGE 4 OF 6 FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
SAVERT 66	C 00585653
theck if 24-hour report 48-hour report New report Amends report filed	ON AMENDED REPORT
Full Name of Payee	Date of Public Distribution/Dissemination
AMERICAN EXPRESS	12 06 2015
Mailing Address	Amount
PO BOX 650448	
City State Zip Code	, ,235.92
DALLAS TX 75265-0448	Date of Disbursement or Obligation
Purpose of Expenditure  OFFICE SUPPLIES CREDIT  Category/ Type 0 1 1	M M / D / Y Y Y
Name of Federal Candidate  CATZ  Support  Office	e Sought: House District:
Oppose Oppose	President Senate State:
	ursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
ARCHAEOPTERYX DESIGN Mailing Address	09 16 2015
1501 BRYN WAWR NE	Amount
City State Zip Code	, ,600.00
ALBUQ. NM 87106	Date of Disbursement or Obligation
Purpose of Expenditure  Category/ Type	M M / D D / Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disb	oursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	, ,835.92
(b) SUBTOTAL of Unitemized Independent Expenditures	· . • • • • • • • • • • • • • • • • • •
(c) TOTAL Independent Expenditures	, ,835.92
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	·
SH School Date 1	01 29 2016

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED INDEPENDENT EXPENDITURES	PAGE 5 OF 6. FOR LINE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
SAVE PST 66	C06585653
theck if 24-hour report 48-hour report New report Amends report	filed on
Full Name of Payee	Date of Public Distribution/Dissemination
WORD CENTER	- 10'19' žois
Mailing Address  512 YAIE BUD SE	Amount
City State Zip Code	, 48.17
ALBUQ. NM 87106	Date of Disbursement or Obligation
Purpose of Expenditure  TRAUSCRIPTION  Category/ Type 0 / /	м м / о о / ч ч ч
Name of Federal Candidate Support	Office Sought: House District:
· Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
DICK SATTER	12 22 2015
Mailing Address	Amount
9201 MONT COMERY NE City State Zip Code	1022
City State Zip Code  ACBUQ NM 87111	, , 79.32
Purpose of Expenditure	Date of Disbursement or Obligation
Type O I	
	Office Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General
	U Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	· ,127.49
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>▶</b>
(c) TOTAL Independent Expenditures	• , ,127.49
Under penalty of perjury I certify that the independent expenditures reported herein were rewith, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
SHS chrock Date	01 29 2016
Date	01 29 2016

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 6 OF 6 FOR LINE 24 OF FORM 3X

JΔI	ME OF COMMITTEE (In Full)	
<b>1</b> /\.	VIE OF COMMITTEE (III Full)	FEC IDENTIFICATION NUMBER ▼
	SAVE RT 66	C 00585653
Che	eck if 24-hour report 48-hour report New report Amends report to	filed on
Ŧ	Full Name of Payee	1
I		Date of Public Distribution/Dissemination
	WALMART Mailing Address	- 08 28 ZOIS
	2701 CARLISLE NE	Amount
1	City State Tip Code	
	ALBUQ. NM 87/10	Parts of Dishumament or Obligation
	Purpose of Expenditure Category	Date of Disbursement or Obligation
	office soffaces	
1	Name of Federal Candidate Support	Office Sought: House District:
1	Oppose	President Senate State:
	Calcificative Date	Disbursement For: Primary General
1	Per Election for Office Sought	Other (specify) >
	Full Name of Payee	Date of Public Distribution/Dissemination
		M M / D D / V V Y .
	Malling Address	
		Amount
-	City State Zip Code	<b></b>
I	Oily and and	, ,
1		Date of Disbursement or Obligation
	Purpose of Expenditure  Category/ Type	M M ! D I Y Y Y
1	Name of Federal Candidate Support	Office Sought: House District:
	Oppose	
1		President Senate State:
- 1		Disbursement For: Primary General
	Per Election for Office Sought , , ,	Other (specify) ▶
<b>M</b>	(a) SUBTOTAL of Itemized Independent Expenditures	, ,132,02
	(b) SUBTOTAL of Uniternized Independent Expenditures	•
	(c) TOTAL Independent Expenditures	• , ,/3202
	Under penalty of perjury I certify that the independent expenditures reported herein were nowith, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	ot made in cooperation, consultation, or concert either, or (if the reporting entity is not a political
	SH Schwich Date	01 29 2016
	Signature	2.7

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TEC (AM): KEVIN MLCL 999 E STREET NW WASHINKTON, DC

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32 NW 87106

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PREPARER (3/2015)

# **Federal Election Commission** ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked Date of Receipt **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):